

Name of the Employee

भारतीय सूचना प्रौद्योगिकी संस्थान, नागपुर

Indian Institute of Information Technology, Nagpur "An Institution of National Importance by an Act of Parliament"

> S.No. 140,141/1 Behind Br. Sheshrao Wankhade Shetkari Sahkari Soot Girni, Village - Waranga, PO - Dongargaon (Butibori), District - Nagpur (Maharashtra) – 441108

Website: www.iitn.ac.in Email: director@iiitn.ac.in, registrar@iiitn.ac.in Phone: - 9405215010

Date:-										
Date.										

PROFORMA TO BE FILLED BY THE INSTITUTE EMPLOYEES WHO SEEK EMPLOYMENT ELSEWHERE

(To be submitted in the Administration Section at least 14 Working Days in advance of the last date of receipt of application by the advertised organization)

2	Employee Id						
3	Designation						
4	Pay Level						
5	Department						
6	Whether advance copy forwarded? If yes, give de	of the application has already been stails as to the date sent					
7	Details of the Post applied (A copy of the advertise dully filled-in / already for	d for: sement along with the application orwarded should be enclosed)	Post - Department - Grade - Level - Pay Scale				
8	the enclosed application is						
9	Body etc.	ovt./ Autonomous Body / Corporate					
10	RTGS No. etc. if enclose						
11	No. of applications alreat Current Calendar Year	ady sent / NOC obtained during the					
12	Last date of receipt of ap	plication in that Organization					
13	Any other Remark						
Signature : Date :							
Verification by Admin No. of applications already sent by the Applicant Faculty during the Current Calendar Year							
Name & Signature of Verifying Officer:							
	Forwarding Note of:	Recommendation Statu	s along with Comments	Signat	ure		
Registrar Registrar							

APPROVED / NOT APPROVED